1288023



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

į	OMB APPE	ROVAL						
ĺ	OMB Number:	3235-0076						
	Expires:	May 31, 2005						
	Estimated average burden							
	hours per respor	nse16.00						

SEC U	SE ONLY
Prefix	Serial
DATE	RECEIVED
=	

A. BASIC IDENT 1. Enter the information requested about the issuer Name of Issuer (med	Telephone Number (including Area Code) (303) 399-4492 Telephone Number (Including Area Code) ase specify): Liability Company
Rame of Issuer (med Imited med Limited ar Actual Estima forcign jurisdiction)	Telephone Number (Including Area Code) Telephone Number (Including Area Code) The process of t
Name of Issuer (A. BASIC IDENTIFICATION DATA ation requested about the issuer check if this is an amendment and name has changed, and indicate change.] Coffices Coffic	Telephone Number (Including Area Code) Telephone Number (Including Area Code) The process of t
Hart Holdco LLC Address of Executive Offices 55 Madison St., Suite 680 Denver, CO 8 Address of Principal Business Operations if different from Executive Offices) Brief Description of Business Holding Company Type of Business Organization corporation business trust Itimited partnership, already for limited partnership, to be formed Month Yea Actual or Estimated Date of Incorporation or Organization: Actual or Estimated Date of Incorporation: (Enter two-letter U.S. Postal Sc CN for Canada; FN for other Canada; FN for	med Limited Limited at Actual Estima ervice abbreviation for State:	Telephone Number (Including Area Code) Telephone Number (Including Area Code) The process of t
Hart Holdco LLC Address of Executive Offices 55 Madison St., Suite 680 Denver, CO 8 Address of Principal Business Operations if different from Executive Offices) Brief Description of Business Holding Company Type of Business Organization limited partnership, already for limited partnership, to be formed limited partnership, already for limited partn	med Limited Limited at Actual Estima ervice abbreviation for State:	Telephone Number (Including Area Code) Telephone Number (Including Area Code) The process of t
Address of Executive Offices 55 Madison St., Suite 680 Address of Principal Business Operations of different from Executive Offices) Brief Description of Business Holding Company Type of Business Organization Corporation Dusiness trust Actual or Estimated Date of Incorporation or Organization: Actual or Estimated Date of Incorporation: Actual or Estimated Date of Incorporation: Actual or Incorporation or Organization: CN for Canada; FN for other GENERAL INSTRUCTIONS Federal: Who Musi File: All issuers making an offering of securities in reliance on an exe (7d(6)). When To File: A notice must be filed no later than 15 days after the first sale.	med	Telephone Number (Including Area Code) Telephone Number (Including Area Code) The process of t
Address of Principal Business Operations (Number and St if different from Executive Offices) Brief Description of Business Holding Company Type of Business Organization limited partnership, already for limited partnership, to be formed limited partnership, already for limited	med with the content of the content	Telephone Number (Including Area Code) asse specify): Liability Company APR 2 2 26
Brief Description of Business Holding Company Type of Business Organization corporation limited partnership, already for limited partnership, to be formed purised partnership, to be formed partnership, already for partnership, to be formed partnership. Month	med Limited Limited ar Actual Estima revice abbreviation for State: r foreign jurisdiction)	PROCESS Liability Company APR 2 2 2
Fype of Business Organization corporation	Limited Actual Estima Estima Fryice abbreviation for State: r foreign jurisdiction)	THOMSO
Type of Business Organization corporation	Limited Actual Estima Estima Fryice abbreviation for State: r foreign jurisdiction)	THOMSO
Corporation Itimited partnership, already for Itimited partnership, to be formed Month Yea	Limited Actual Estima Estima Fryice abbreviation for State: r foreign jurisdiction)	THOMSO
Actual or Estimated Date of Incorporation or Organization: ### U.S. Postal Sc CN for Canada; FN for other Companization: ###################################	ar 4	THOMSO
Federal: Who Must File: All issuers making an offering of securities in reliance on an exe (77d(6)). When To File: A notice must be filed no later than 15 days after the first sale	nution under Regulation D or So	
Who Musi File: All issuers making an offering of securities in reliance on an exe 17d(6). When To File: A notice must be filed no later than 15 days after the first sale	mption under Regulation D or Sc	
	orboren energy residential is of the	ection 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
	SEC at the address given below	
Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street	. N.W. Washington, D.C 2054	49.
Copies Required: Five (5) copies of this notice must be filed with the SEC, on shotocopies of the manually signed copy or hear typed or printed signatures.	e of which must be manually si	igned. Any copies not manually signed must be
Filing Fee: There is no federal filing fee.		
ULOE and that have adopted this form. Issuers relying on ULOE must file are to be, or have been made. If a state requires the payment of a fee as a p	a separate notice with the Sec precondition to the claim for t	curities Administrator in each state where sales the exemption, a fee in the proper amount shall
ATT!	ENTION	

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9



,,		BASIC 1D	ENTIFICATION DATA		
2. Enter the information re	quested for the fol	lowing:			
 Each promoter of the 	issuer, if the issue	er has been organized wi	thin the past five years,		
 Each beneficial owner 	having the power t	to vote or dispose, or direc	et the vote or disposition of	, 10% or more of a	class of equity securities of the issuer.
 Each executive office 	r and director of e	orporate issuers and of e	orporate general and mana	iging partners of pa	artnership issuers; and
 Each general and ma 	naging partner of	partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name tirst, if	individual)		· • • • •		<u> </u>
Hart Management, Inc.					
Business or Residence Addre			le)		
55 Madison St., Suite 6	80, Denver, CO	80202			
Check Box(es) that Apply:	Promoter	★ Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)		.,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		
Wiegers & Co.		er er jag til til er			
Business or Residence Addre		-	le)		
55 Madison St., Suite 6					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	`individual)				
Fieldstone Colorado Co Business or Residence Addre	. •	treet, City, State, Zip Coo	de)		
One Town Square, Suit	e 1600, Southfi	eld, MI 48076			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, it	`individual)				
Welsh, Patrick Business or Residence Addre	ess (Number and S	treet City State Zin Coo	te)		
3 Essex Road, Summit,		week, e hy. owiet zip e ov	<i>(C)</i>		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	`individual)				
Carson, Russell C. Business or Residence Addre	ess (Number and S	Street, City, State, Zin Coo	te)		
320 Park Ave., Suite 25		,	,		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	`individual)	- 		 	
Hart Compass Investors Business or Residence Addr		Street, City. State. Zip Coo	de)		
599 Lexington Ave., 38	8th Floor, New	York, NY 10022			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				·
Business or Residence Addr	ess (Number and S	Street, City, State, Zip Co.	de)		
	Allen Isla	nd shart as cant and wa	additional copies of this . Is	ant as nagracians	

	,			В.	INFORMA	TION ABO	OUT OFFER	RING				
I . Has the	issuer sol	d. or does							-		Yes	No X
							n 2. if filin					25.000
2. What is	the minin	num invest	ment that	will be acc	cepted fror	n any indiv	vidual?					25,000
3. Does the	e offering	permit joi	nt ownersl	nip of a sin	ngle unit?	: 		• • • • • • • • • • • • • • • • • • • •			Yes	No X
If a person	sion or sin on to be li . list the n	nilar remun sted is an a ame of the	eration for ssociated p broker or d	solicitation erson or ag caler. It m	i of purcha gent of a br ore than fiv	sers in com oker or dea re (5) perso	l be paid on nection with ler register ns to be list or dealer on	h sales of seed with the ted are asso	ecurities in SEC and/	the offeri or with a s	ng. tate	
Full Name	(Last nam	e first, if in	dividual)			:						
Business or	Residenc	e Address	(Number a	nd Street. (City, State.	Zip Code)						
Name of A	ssociated	Broker or	Dealer									
States in W	/hich Pers	on Listed I	las Solicit	ed or Inter	ds to Solic	it Purchase	ers					
(Check	k "All Stat	es" or chec	k individu:	ıl States)			**************************************					All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [1A] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Business o	r Residenc	ec Address	(Number a	ind Street.	City, State	. Zip Code)					
wante of A	SSOCIATEG	moker or	Dealer									
States in W	which Pers	on Listed	Has Solicit	ed or Inter	nds to Solic	rit Purchase	ers	<u>.</u> .				
(Chec	k "All Stat	tes" or chec	k individus	d States)							🔲 /	All States
[AL] [IL] [MT] [RI]		[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[ME]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]		[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]
Full Name	(Last nam	e first, if in	dividual)									
Business o	r Residen	ce Address	(Number a	and Street.	City, State	, Zip Code)					
Name of A	ssociated	Broker or	Dealer									
States in V	Vhich Per	son Listed	Has Solicit	ed or Inter	nds to Solic	it Purchas	crs		·			
(Chec	k "All Sta	tes" or chec	ek individua	al States)		- 						All States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

OFFERING PRICE. NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

a	dready exchanged.			Aggregate	Amo	unt Already
	Type of Security	1	(Offering Price		Sold
	Debt		S_		\$	
	Equity		\$_		S	
		Common Preferred				
	Convertible Securities (including warrants)		\$_		S	
	Partnership Interests		S_		S	
	Other (Specify LLC Interests		S_	13,970,000	s <u> </u>	3,970.000
	Total		S_	13,970,000	s <u>1</u>	3.970,000
	Answer also in Appendix, Column	n 3. if filing under ULOE.				
2. E	nter the number of accredited and non-accredited offering and the aggregate dollar amounts of their the number of persons who have purchased seek purchases on the total lines. Enter "O" if answer is	purchases. For offerings under Rule 504, indic urities and the aggregate dollar amount of th	ate		/	Aggregate
				Number Investors	Dol	lar Amount Purchases
	Accredited Investors.			15	S	13,970,000
	Non-accredited Investors			0	S	0
	Total (for filings under Rule 504 only)				S	
	Answer also in Appendix, Col	umn 4. if filing under ULOE.				
3. I1	this filing is for an offering under Rule 504 or 505 sold by the issuer, to date, in offerings of the types if first sale of securities in this offering. Classify s	indicated, in the twelve (12) months prior to th	e			
	Type of Offering			Type of Security	Do	llar Amount Sold
	Rule 505			-	ς	0
	Regulation A				S	0
	Rule 504					0
						0
4	a. Furnish a statement of all expenses in connesceurities in this offering. Exclude amounts relating The information may be given as subject to future not known, furnish an estimate and check the box	ction with the issuance and distribution of ng solely to organization expenses of the insur- contingencies. If the amount of an expenditur	the er.			
	Transfer Agent's Fees				S	0
	Printing and Engraving Costs		, , . , .		S	0
	Legal Fees.			X	S	150,000
	Accounting Fees			X	S	25,000
	Engineering Fees				S	. 0
	Sales Commissions (specify finders' fees sepa	rately)			S	0
	Other Expenses (identify) Miscellaneous A	Acquisition Expenses		X	S	150,000
	Total	:		X	S	325,000

OFFERING PRICE	E. NUMBER OF INVESTORS, EXPENSE	S AND USE OF PROCEEDS	
	gate offering price given in response to Pa o Part CQuestion 4.a. This difference is t		s 13,645,000
 Indicate below the amount of the adjusted each of the purposes shown. If the amount check the box to the left of the estimate. The proceeds to the issuer set forth in response. 	int for any purpose is not known, furnish he total of the payments listed must equal	an estimate and	
		Payments to	
	1	Officers. Directors, &	Dovements to
	:	Affiliates	Payments to Others
Salaries and fees	; 		_ S500,000
Purchase, rental or leasing and installation			
			_ 🗆 S
Construction or leasing of plant building	gs and facilities	S	S
Acquisition of other businesses (includi-	ng the value of securities involved in this		
offering that may be used in exchange for issuer pursuant to a merger)	or the assets or securities of another	П	<u></u> s 12,520,000
	:		
	1		
	es		
	1		
			_ []S
	·		
Column Totals			
Total Payments Listed (column totals add	ded)	S_	13,645,000
	D. FEDERAL SIGNATUR	E	
the issuer has duly caused this notice to be signature constitutes an undertaking by the is ne information furnished by the issuer to any	suer to furnish to the U.S. Securities and E	Exchange Commission, upon writte	
ssuer (Print or Type)	Signature	Date	/
Hart Holdco LLC	Signature	4-9-69	4
lame of Signer (Print or Type)	Title of Signer (Frint or Type)		
E. Alexander Wiegers	Vice President of Hart Mar	nagement Inc., Manager	
	1		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C.1001.)

٠.	• E. STATE SIGNATURE									
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification Yes No provisions of such rule?									
	See Appendix. Column 5, for state response.									
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (L7 CFR 239,500) at such times as required by state law.									
3.	3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnishe issuer to offerees.									
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
	uer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned thorized person.									
Issuer (f	Print or Type) Signature Date									
Hart H	Holdco LLC (HILLING) 4-9-04									
Name (I	Print or Type) Title (Print or Type)									
E. Ale	vander Wiegers Vice President of Hart Management, Inc., Manager									

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				Αſ	PPENDIX				
1	Type of security Intend to sell to non-accredited investors in State (Part B-Item 1) Type of security and aggregate offering price offered in state (Part C-Item 1) Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL						4)			
AK									
ΑZ									
AR									
CA	***								
CO		X	LLC Units \$6,020,000	10	6,020,000	0	0		X
СТ									
DE									
DC									
FL									
GA									-
НІ									
ID									
IL									
IN									
1/4									
KS									
KY									
LΛ									
ME									
MD									
МΛ									
MI		X	LLC Units \$2,500,000	1	\$2,500.000	0	0		X
MN									
MS									

k	•			APP	ENDIX					
1	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate on-accredited offering price stors in State offered in state		4 Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item I)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
МТ										
NE	•									
NV										
NH										
IN		X	LLC Units \$1,600,000	1	1,600,000	0	0		×	
NM										
NY		×	LLC Units \$3,100,000	2	3,100,000	0	0		X	
NC										
ND										
ОН										
ок										
OR										
PA										
RI										
SC										
SD										
TN										
ТХ										
UT										
VT								 		
VA		X	LLC Units \$750,000	1	\$750,000	0	0		X	
WA			2/20 000	-	27.24,707	*	-	1		
WV										
WI										

				APPE	ENDIX				
i	Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Itern 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR									